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ILMINSTER URBAN DISTRICT COUNCIL

ANNUAL REPORT

of

THE MEDICAL OFFICER OF HEALTH.

for the year ended 31st December, 1962

Health Department,
16, Church Street,
CREWKERNE,
Somerset.

Telephone No.
Crewkerne 419

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PUBLIC HEALTH OFFICERS

Medical Officer of Health

A. M. McCall
V.R.D., M.R.C.S., L.R.C.P., D.P.H.

Public Health Inspector

P. K. Bussell, M.A.P.H.I.

Clerk to Medical Officer

Miss Y. Michael, B.A.

Health, Highways, Buildings & Water Committee

E. A. Bradburn
F. W. J. Britten
A. A. C. Derrick (Chairman)
A. W. C. Gooch
S. L. Suffolk

Housing Committee

E. A. Bradburn
F. W. J. Britten
L. G. Burt
L. G. Carbin
L. T. Clapp
A. A. C. Derrick
A. W. C. Gooch
Mrs. E. Hunt
B. J. Pike
Mrs. M. T. Prew
S. L. Suffolk
H. J. Tolley

Health Visitor

Mrs. O. J. M. Pitt
S.R.N., S.C.M., H.V.

District Nurses

Mrs. Crouch, S.R.N., S.C.M.
Miss Rudge, S.R.N., S.C.M.

To the Chairman and Councillors of the Ilminster Urban District Council.

Mr. Chairman, Ladies and Gentlemen,

The form of my report for the year 1962 follows broadly the same design as my previous reports.

While the health services provided by the County Council during the last few years have continued to function smoothly my last two reports have shown that the environmental services over which you may exercise control had fallen to what might be described as a low ebb in 1960 and 1961. Now, I am pleased to be able to report a dramatic improvement and I consider this entirely due to the excellent work of your Public Health Inspector, Mr. Bussell. I work in my capacity as your Medical Officer of Health for less than half a day a week. This amount of time allows for consultation and advice and leaves little time for actual inspection. I, like you, rely on the industry of your Inspector.

I am,

Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant,

A. M. McCALL

Medical Officer of Health

To the Chairman and Councilors of the Lincolnton Urban District
Council.

Mr. Chairman, Ladies and Gentlemen,

The form of my report for the year 1955 follows broadly the
same design as my previous reports.

While the health services provided by the County Council
during the last few years have continued to function smoothly my
last two reports have shown that the administrative services over
which you may exercise control had fallen to what might be
described as a low ebb in 1950 and 1951. Now, I am pleased to
be able to report a dramatic improvement and I consider this
entirely due to the excellent work of your Public Health Inspector,
Mr. Bonnell. I work in my capacity as your Medical Officer of
Health for less than half a week. This amount of time
allows for consultation and advice and leaves little time for
actual inspection. I, like you, rely on the industry of your
Inspector.

I am,
Mr. Chairman, Ladies and Gentlemen,

Yours obedient servant,

A. M. McCALL

Medical Officer of Health

SECTION A

Statistics and Social Conditions of the Area

Population

The Registrar General's estimated mid-year population for 1962 was 2,790, a slight increase over the previous year. The population density is 5.2 per acre.

Birth Rate

The Corrected Birth Rate for 1962 was 14.69 per thousand, compared with the national figure for England and Wales of 18. There were four illegitimate births, which is equal to 9.7% of live births. There was one illegitimate birth in 1961.

Death Rate

The corrected Death Rate for the year was 9.43 and compares favourably with the national figure of 11.9. Coronary disease and other heart disease caused eight deaths, nine were due to diseases of the circulation. There were four deaths due to cancer and this figure was equalled by deaths due to diseases of the lungs. There has been a small but steady increase in the number of deaths due to lung conditions over the past few years.

The fear of death See separate page.

Maternal Mortality

There were no maternal deaths in 1962.

Stillbirths

There was one stillbirth registered during the year.

Infant Mortality

There was one infant death reported in 1962, due to prematurity; the infant only survived seven hours.

Social Conditions

The social services remained unchanged during the year and were generally satisfactory.

SECTION A

Statistics and Social Conditions of the Area

Population

The Registrar General's estimated mid-year population for 1965 was 5,790, a slight increase over the previous year. The population density is 5.5 per acre.

Birth Rate

The corrected birth rate for 1965 was 14.69 per thousand, compared with the national figure for England and Wales of 18. There were four illegitimate births, which is equal to 0.7% of live births. There was one illegitimate birth in 1964.

Death Rate

The corrected death rate for the year was 9.45 and compares favourably with the national figure of 11.9. Coronary disease and other heart diseases caused eight deaths, nine were due to diseases of the circulation. There were four deaths due to cancer and this figure was equalled by deaths due to diseases of the lungs. There has been a small but steady increase in the number of deaths due to lung conditions over the past few years.

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There were no maternal deaths in 1965.

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Infant Mortality

There was one infant death reported in 1965, due to prematurity; the infant only survived seven hours.

Social Conditions

The social services remained unchanged during the year and were generally satisfactory.

The fear of death and the instinct for procreation are present in all animals. No doubt they are relics of a time when the course of evolution depended on survival and fertility. Nevertheless they continue in civilized man. When reading this section of the report I have no doubt that a slight chill descends on the reader. Many people have a considerable fear of death, yet fear is rarely seen in dying patients. Samuel Johnson, whose life is as well documented as any, died in December, 1784. In February of that year he wrote to Boswell "I am extremely afraid of dying." Yet a few months later when he knew he was dying his doctor reported "All his fears were calmed."

One must distinguish the so called agony of dying from the pain of the disease. Agony is a suffering and not a pain; the two conditions are essentially different. Pain is a feeling like touch, suffering is a state of mind that may be induced by pain but there the relationship ends. The approach to death may be horribly painful but the pain is in the disease not in the dying. To those who witness death the end may appear hideous but the show is not visible to the patient. The distorted features and the convulsive movements are phenomena of release due to withdrawal of the restraining influence of higher centres, but this withdrawal only occurs when the patient has lost consciousness. The so-called agony is a myth wrongly interpreted.

The fear of death and the hastiness for protection are present in all animals. No doubt they are raised at a time when the course of evolution depended on survival and fertility. Nevertheless they continue in civilized man. When reading this section of the report I have no doubt that a slight chill descended on the reader. Many people have a considerable fear of death, yet few are rarely seen in dying patients. Samuel Johnson, whose life is so well documented as any, died in December, 1792. In February of that year he wrote to Boswell "I am extremely afraid of dying." Yet a few months later when he knew he was dying his doctor reported "All his fears were calmed."

One must distinguish the so-called agony of dying from the pain of the disease. Agony is a suffering and not a pain; the two conditions are essentially different. Pain is a feeling like toothache, suffering is a state of mind that may be induced by pain but there the relationship ends. The approach to death may be horribly painful but the pain is in the disease not in the dying. To those who witness death the way may appear hideous but the show is not visible to the patient. The disturbed features and the convulsive movements are phenomena of release due to withdrawal of the restraining influence of higher centres, but this withdrawal only occurs when the patient has lost consciousness. The so-called agony is a myth wholly interpreted.

SECTION B

General Provision of Health Services in the Area

The services remained unchanged during the year but the existing ones functioned satisfactorily.

Care of Mothers and Young Children

The antenatal and postnatal care of mothers and children continued unchanged and was of a satisfactory standard.

Antenatal Care

No antenatal clinics are held in the town but routine antenatal examinations are carried out by the general practitioners and district nurses. Expectant mothers received regular supervision throughout their pregnancies.

Domiciliary Midwifery

The district nurses were present at all home confinements and private practitioners supervised their own cases.

Hospital Confinement

Those cases needing admission to hospital for their delivery were generally admitted to the maternity unit at Musgrove Park Hospital which offers a very high standard of service.

Infant Welfare Clinic

Infant welfare clinics are held every week and Dr. Bond attends twice a month. Details of attendances are shown in Appendix B, Table 1.

Health Visiting

The person responsible for general health and also for tuberculosis health visiting in the town is Mrs. Pitt. She attends all school medical inspections and provides the necessary liaison between myself and parents who, for one reason or another are unable to be present when their child is given a medical examination. She also is present at the Chest Physician's out-patient clinics at Chard and does a considerable amount of follow-up work in this connection, although, I am pleased to say that the number of cases of tuberculosis is decreasing.

Home Nursing

The District Nurses are responsible for this work and continued to give a service which is greatly appreciated.

Immunisation

Immunisation continued at the clinic and in the Doctor's surgeries. All infants are now given triple vaccine for protection against diphtheria, tetanus and whooping cough. Oral poliomyelitis vaccine was also used in an increasing amount. Details can be found in Appendix B, Table 3.

Vaccination

The outbreak of smallpox in the North of England and more particularly in South Wales led to a very heavy demand for vaccination in the early part of the year. Most of these were re-vaccinations, although a number of primary vaccinations in adults were done. Details are shown in Appendix B, Table 3.

Home Help Service

This service, organised by the County Council continued to be available and was only limited by the availability of suitable staff.

School Medical Service

As usual I visited all the schools in the town and details are shown in Appendix B, Table 2.

In the course of my many school inspections I am constantly talking to the children about their future work and aspirations. One reads more and more about the necessity to bridge the gap between Grammar and Secondary Modern Schools and various expedients have been suggested; the abolishment of the 11+ examination and the introduction of comprehensive schools appear to be designed to make all children feel equal. Recently in one school I visited, on asking a number of children which class they were in each gave me a different letter as being their class. I was puzzled by this and on enquiry found that an educational expert had suggested that to avoid discrimination between the various "streams" the class should be named after the first letter of the class teacher's name. In this way any sense of inferiority would be eliminated. I then began to wonder who we were fooling because when I asked the children themselves for an explanation "Oh it's only the old 3D or 4C" or whatever class was being camouflaged was the answer.

I think it most important that every child should have equal opportunity for education but I question the wisdom of trying to make children feel we are all equal. We are not all equal and the sooner one can find that out, in my view, the better. It comes as a nasty shock and if we continue to foster the idea that Jack is as good as his master we are going to have a very large number of discontented teenagers and young adults.

I am not suggesting that we revert to the Victorian idea that you are born to a certain station in life and there you remain for the rest of your life. Every encouragement should be given to all children to improve their lot and work to their full capacity, but let us be honest about it.

School Dental Service

The School Dental Surgeon is Mrs. Walker who works part-time for the County Council and has her headquarters at Chard. As will be seen from Appendix B, Table 2, no schools were inspected in 1962 and the Infants' School, the Boys' Grammar and Junior Schools have not received a visit since the spring of 1958. This can hardly be considered a satisfactory record now that we hear that the County dental staff situation is greatly improved. Ilminster is very fortunate in having an active private practitioner who does a great deal of good work among the schoolchildren.

Orthopaedic Service

A clinic is held once a month by the orthopaedic sister, Miss Read, in the nearby town of Chard. Children attend by appointment and are referred to the appropriate surgeon at regular intervals. Copies of the surgeon's Report are sent to me as a routine and are therefore available when I see the children concerned at school medical inspections.

Ophthalmic Service

Routine eye testing at schools is carried out at the annual medical inspection. Reports of the County Oculist are always available at that time and every endeavour is made to see that the children are co-operating with him. Any damaged or unsatisfactory spectacles are dealt with as appropriate.

Epileptics

The arrangements for the treatment of epileptics remained unchanged. Details of this service were given last year.

Spastics

I have commented at some length on this subject in the last two Reports and their services available continue.

Blind Persons

The Somerset Association for the Blind do the general administration and case-work for these disabled persons. They receive a grant from the County Council. This is an excellent example of a voluntary association working in co-operation with a local health authority and carrying out a great deal of excellent work. There are 25 on the Blind Persons Register and 2 partially sighted persons in the area. Prior to admission to the Register, a blind person is examined by a medical practitioner with special experience in ophthalmology.

Ambulance Service

The ambulance service is provided by the County Council and there is a garage depot in the town. However, they are all controlled by radio telephone from Taunton or Yeovil. This arrangement proved satisfactory during the year.

Mental Health Services

These services continued to be administered by the County Council through the Mental Health Sub-Committee. The new Regulations have come into force and are working satisfactorily.

National Assistance Act

I was under considerable pressure during the year to remove one elderly lady from her home. There were varying reports on her condition but my inspections and those of other responsible persons led me to resist taking statutory action. Finally she voluntarily agreed to move to an old persons home.

This type of case occurs at regular intervals and the General Practitioner and Medical Officer of Health have the onerous task of deciding whether the use of their statutory powers will be to the benefit of the person concerned or merely satisfy the insistent demands of neighbours.

Care of the Aged

I reported on this service at some length last year and it continued in substantially the same manner in 1962.

Disabled Persons

The Good Fellowship Club was forced to close down during the winter months due to their small size and illness among the members. It was re-opened in the spring and met fortnightly in the evening in a room lent by the Grammar School.

Health Education

The Council are supporters of the Central Council for Health Education and use their literature and posters freely. Most of the effort during 1962 was directed towards the problem of smoking and lung cancer and posters and leaflets were on display throughout the year and frequently changed in an endeavour to awaken public interest in the problem.

SECTION C

Prevention and Control over Infectious Diseases and Other Diseases

There was a sharp outbreak of measles in November and December in the south west of Somerset but fortunately we were only slightly affected, eighteen cases being notified. Of the two cases of tuberculosis, one was non-pulmonary and the pulmonary case was a transfer into the town from the Chard Rural District. Details are recorded in Appendix C, Table 1.

As I have already reported in a previous section, there was a considerable demand for vaccination against smallpox and the immunisation with triple vaccine against diphtheria continued. Oral poliomyelitis vaccine was introduced mid-way through the year and generally accepted.

I carried out B.C.G. vaccination against tuberculosis in the three senior schools in the spring term. Although there was a satisfactory response, more parents could avail themselves of this very important protection for their teenage children.

Last year I reported in detail on the state of the dental health of the Ilminster children. In the meantime, by the end of the year, the Government were taking steps to implement the findings of the pilot experiments on flouridation of water supplies. When this is fully implemented in the country it will probably prove to be one of the greatest public health preventive measure of this century.

The Mass Radiography Service sent a unit to Ilminster in June and a total of 1,035 people were X-Rayed. In 1957 the figure was 634, in 1960 it was 902. 1962 was the first year that the thousand mark had been exceeded. Full details are shown in Appendix C, Table 2. One inactive case of tuberculosis was found among those people showing chest abnormalities. The improved attendance undoubtedly was the result of better prior publicity with a letter from the Medical Officer of Health to every householder and personal letters to the general practitioners of Ilminster. In addition the Council approved the siting of the X-Ray vans in the most central part of the town where they could not fail to be seen by a maximum number of persons.

SECTION D

Environmental Health Services

A. Sanitary Circumstances

Climatic Conditions

The total rainfall for 1962 was 25 inches this year, very low indeed and the continuing lack of rain is bound to have some effect of the water supply.

Water Supply

There has been a considerable improvement in the general management of the water supply during 1962. Your new Public Health Inspector took energetic steps to provide the town with a satisfactory supply of wholesome water. The Cudworth works have been completely overhauled and improved, a new chlorination plant has been obtained and regular sampling carried out. As a result there have been no complaints about the water, nor have there been any grounds for them. This happy situation is undoubtedly due to Mr. Bussell's active work during the year.

The demand for water exceeds the supply and it is augmented by the purchase of water from the Chard Rural District Council. The mains supply was extended to a new housing estate at Orchard Vale where 75 dwellings will be erected. The approximate cost was £1,150. Full details are shown in Appendix D, Table 1.

Drainage and Sewage Disposal

Samples of the effluent from the new works continued to show an unsatisfactory amount of solids in suspension and a high biochemical oxygen demand. The consulting engineers gave further advice and again Mr. Bussell was most active in carrying out these suggestions which resulted in some improvement but the problem has not yet been entirely solved.

The sewers were extended to a new housing estate at Orchard Vale at a cost of £3,310.

Public Cleansing and Refuse Collection

The Dowlish Ford tip rapidly filled up and an alternative site was urgently required. Several suggestions were put forward and investigated. Finally a suitable tip was found at Chilworthy where, with the co-operation of the County Council two hollows were chosen and arrangements made for tipping. In a small urban area the disposal of refuse is a major problem and the Public Health Committee devoted a considerable amount of time to solving the difficulties. Not all the decisions were readily accepted by the residents.

Rodent Destruction

One part-time operator is employed and carries out his routine work well. No serious infestations were reported.

Swimming Bath

There is no public swimming bath in the town but two senior schools have baths. Unfortunately water was not available for either during the year but both schools were making arrangements to improve their baths and introduced re-circulation and mechanical chlorination.

B. Factories Act.

Details of the inspections carried out by the Public Health Inspector are shown in Appendix D, Table 2.

C. Housing

Appendix D, Table 3, a very comprehensive table, gives details of the housing situation in the town.

This list of applicants for housing accommodation was categorised and it was found that there were 65 applicants for houses and 53 applicants for bungalows. Of the applicants for houses, 42 had young families and 23 were without children. Seventeen of the applicants were from Summervale.

Summervale is an Estate of war-time pre-fabricated bungalows. These have been deteriorating since the war and some years ago I recommended a policy of re-housing the persons living there and placing a Closing Order on each bungalow so vacated. Some progress was made but there were still a large number of applicants for re-housing from this Estate. In May the Public Health Inspector and I visited all the occupied premises: they numbered seventeen and all had asked to be re-housed. They all appeared to be good type tenants, interested in their homes and liked living in the area but they were all, without exception, dissatisfied with the condition of the buildings. There are a few minor differences but generally all these pre-fabricated bungalows have passed their useful life. They all show rising or penetrating damp to a varying degree. Many of the outside wall panels have slipped down leaving gaps of three to nine inches between the top panel and the roof. Much of the sawdust insulation material between the inside and outside walls has fallen out of the bottom so that the insulation in the top half of the walls is scanty or absent. Many of the chimneys are defective and some have caught fire. Doors and windows are defective and all show varying signs of general decay.

At the June Meeting of the Public Health Committee I submitted my Report on these houses and recommended that immediate steps be taken to deal with them before the next winter. I suggested that the most convenient method would be to use Slum Clearance procedure as all the bungalows could conveniently be included within one curtilage. The matter was referred to the Housing Committee without recommendation and they, at their June Meeting, resolved that these bungalows be dealt with as individual dwellings and that Notice of Time and Place be served on the owner of the properties.

At the end of the year, seventeen families were still applying to be re-housed and had to endure the worst winter of the century in homes that are known to be unfit to live in.

D. Inspection and Supervision of Food

Milk.

There are three registered distributors of milk and one registered dairy premises in the town.

Ice Cream

There are seventeen premises registered for the sale of ice cream. All sell the pre-packed product and no manufacturing of ice cream is carried on in the district.

Meat

There are two licensed Slaughterhouses in the town. Appendix D, Table 4 gives details of the meat inspected. It was estimated that in the early autumn about 12% of cattle, 10% of sheep and 40% of pigs slaughtered were being inspected and that this represented about 95% of meat consumed by Ilminster residents. Without additional help it is not possible to give 100% meat inspection at the large Slaughterhouse where the majority of the meat is exported to London and other centres.

Food Premises

There are seventeen premises registered under Section 16 of the Food and Drugs Act, 1958, and some inspections were carried out. No statutory action was necessary.

APPENDIX A - TABLE 1

Registrar General's estimate of Population mid 1962	2,790
No. of inhabited houses at the end of 1962 according to the Rate Book	1,040
Rateable Value	£ 33,129
Sum represented by a penny rate	£130.
Area	531 acres

APPENDIX A - TABLE 2

BIRTH RATE - 14.69		Comparability Factor 1.00	
Live Births	Total	M 21	F 20
	Legitimate	19	18
	Illegitimate	2	2
Still Births	Total	1	-
	Legitimate	1	-
	Illegitimate	-	-
Death of Infants under 1 year	Total	1	-
	Legitimate	1	-
	Illegitimate	-	-
Deaths of Infants under 4 weeks	Total	1	-
	Legitimate	1	-
	Illegitimate	-	-
Deaths of Infants under 1 week	Total	1	-
	Legitimate	1	-
	Illegitimate	-	-

APPENDIX A - TABLE 3

DEATH RATE - 9.43		Comparability Factor 0.94		
		M	F	Total
Heart:	Coronary Disease	1	2	3
	Other Heart Disease	2	3	5
Circulation:	Vascular Lesions of Nervous system	2	5	7
	Other circulatory diseases	2	-	2
Cancer of:	Stomach	-	-	-
	Lung	-	-	-
	Uterus	-	-	-
	Breast	-	-	-
	Other sites	1	3	4
Lungs:	Tuberculosis	-	-	-
	Influenza	-	1	1
	Pneumonia	1	-	1
	Bronchitis	2	-	2
Duodenal ulcer		-	1	1
Other ill-defined diseases		1	1	2
		12	16	28

APPENDIX B - TABLE 1

ILMINSTER CHILD WELFARE CLINIC

Statistics for the twelve months ended
31st December, 1962

Children on Register who attended during 1962

Born in 1962	....	50
Born in 1961	....	42
Born 1957 - 60	....	77

No. of children who attended Clinic for the first time

Under 1 year of age	.....	50
Over 1 year of age	.....	5

No. of attendances in 1962

Under 1 year of age	....	767
1 - 2 years of age	....	165
2 - 5 years of age	....	237

APPENDIX B - TABLE 2

<u>Name of School</u>	<u>No. on Roll</u>	<u>No. in-spected</u>	<u>Date of Inspection</u>	<u>Children having milk</u>	<u>Children having dinner</u>	<u>Diphtheria Immauni-sation</u>	<u>Date of last Dental in-spection</u>
Ilminster Boys' Grammar	182	47	25.7.62	60.44%	56.04%	-	7.3.58
Ilminster Infants' & Junior Girls'	145	77	13/15 12.61	93.10%	51.03%	24	24.1.58
Ilminster Junior Boys'	85	45	15.1.62	70.59%	58.82%	-	25.1.61
Ilminster Secondary Modern	345	178	14/16/18 5.62	37.67%	58.84%	-	3.10.60

APPENDIX B - TABLE 3

POLIOMYELITIS VACCINATION

Primary Courses

Children born 1962/Children born 1943-61/Young persons/Persons under 40 years
born 1933-42 of age & priority groups

<u>Salk</u>	<u>Oral</u>	<u>Salk</u>	<u>Oral</u>	<u>Salk</u>	<u>Oral</u>	<u>Salk</u>	<u>Oral</u>
-	1	9	9	-	4	4	4

Reinforcements, 1962

<u>No. of persons (all groups) who received a third reinforcing injection</u>	<u>No. of children of 5 yrs. but under 12 yrs. who received a fourth reinforcing injection</u>	<u>No. of persons (all groups) who received a re-inforcing dose of Oral vaccine following two Salk injections</u>	<u>No. of children of 5 yrs. but under 12 yrs. who received 1 dose of Oral vaccine after three Salk injections</u>
57	7	31	6

SMALLPOX VACCINATION

<u>Age Groups</u>	<u>Under 1</u>		<u>1</u>		<u>2 - 4</u>		<u>5 - 14</u>		<u>15 or over</u>		<u>Totals.</u>	
	P	R	P	R	P	R	P	R	P	R	P	R
	26	-	20	-	26	8	39	26	72	154	183	188

P = Primary Vaccination

R = Re-vaccination

DIPHTHERIA IMMUNISATION

No. of children who completed a full course of primary immunisation in the year ended 31st December, 1962

Children born in the years:	1962	1961	1960	1959	1958	1953-57	1948-52	Total
	18	28	14	2	2	8	-	72

No. of children who received a reinforcing injection in the year ended 31st December, 1962

Children born in the years:	1962	1961	1960	1959	1958	1953-57	1948-52	Total
	-	-	-	1	1	5	1	8

WHOOPING COUGH IMMUNISATION

No. of children who completed a primary course (normally 3 injections) of pertussis vaccine (singly or in combination) in the year ended 31st December, 1962

Children born in the years:	1962	1961	1960	1959	1958	1953-57	1948-52	Total
	18	28	14	2	2	6	-	70

TETANUS IMMUNISATION

No. of children who completed a primary course and the no. of children who received a reinforcing injection during the year ended 31st December, 1962

Children born in the years:	1962	1961	1960	1959	1958	1953-57	1948-52	Total
Primary course	18	28	14	2	2	5	-	69
Reinforcing injection	-	-	-	-	1	-	-	1

APPENDIX C - TABLE 1

Infectious and Other Notifiable Diseases

Pulmonary Tuberculosis	...	...	1
Non-Pulmonary Tuberculosis	...	1	
Scarlet Fever...	...	...	3
Pneumonia	...	...	2
Measles...	...	...	18

Analysis of Cases Notified

	Under 1 yr.	1-2	2-3	3-4	4-5	5-10	10-15	15-20	10-35	35-45	45-65	65+	Age Unknown
Scarlet Fever				1		1							
Pneumonia							1					1	
Measles		1	3	3	6	5							

Tuberculosis

Age Group	New Cases -				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
-		1						
1 -		5						
5 -		15						
15 -		25						
25 -		35						
35 -		45						
45 -		55						
55 -		65						
65+								
Age Unknown								
Total	1	-	-	1	-	-	-	-

APPENDIX C - TABLE 2

Mass Radiography

<u>The Market Place, Ilminster, 19th - 22nd June, 1962</u>	<u>Male</u>	<u>Female</u>	<u>Total</u>
Number X-Rayed	267	418	685
Chest Abnormalities detected	1	5	6
<u>Analysis</u>			
Inactive Tuberculosis	-	1	1
Acquired Cardiac Lesion	-	3	3
Atelectasis	1	-	1
Secondary Carcinoma	-	1	1
<u>Horlicks Farms & Dairies, Ilminster, 4th June, 1962</u>			
Number X-Rayed	37	19	56
Chest Abnormalities detected	-	-	-
<u>Wharf Lane Concrete Co., Ilminster, 5th June, 1962</u>			
Number X-Rayed	101	8	109
Chest Abnormalities detected	-	-	-
<u>C. & J. Clark, Ltd., Ilminster, 18th June, 1962</u>			
Number X-Rayed	51	83	134
Chest Abnormalities detected	-	-	-
<u>Hyde Plastics, Ltd., Ilminster, 19th June, 1962</u>			
Number X-Rayed	23	28	51
Chest Abnormalities detected	-	-	-

APPENDIX D - TABLE 1

Water Supplies

Piped Supplies - results of
samples taken for Analysis

<u>Raw Water</u>				<u>Treated after going into Supply</u>			
<u>Bacteriological</u>		<u>Chemical</u>		<u>Bacteriological</u>		<u>Chemical</u>	
<u>Satis-</u> <u>factory</u>	<u>Unsatis-</u> <u>factory</u>	<u>Satis-</u> <u>factory</u>	<u>Unsatis-</u> <u>factory</u>	<u>Satis-</u> <u>factory</u>	<u>Unsatis-</u> <u>factory</u>	<u>Satis-</u> <u>factory</u>	<u>Unsatis-</u> <u>factory</u>
-	-	-	-	2	2	2	2

Water supplies from Public Mains

	<u>Direct to the Houses</u>			<u>By means of Standpipes</u>		
	<u>Public</u>	<u>Water Cos.</u>	<u>Private</u>	<u>Public</u>	<u>Water Cos.</u>	<u>Private</u>
No. of dwellings	879	-	-	183	-	-
Population	2,378	-	-	412	-	-

APPENDIX D - TABLE 2

Factories Acts, 1937 - 1959

	<u>No. on Register</u>	<u>No. of Inspections</u>	<u>No. of written notices</u>	<u>No. of occupiers prosecuted</u>
(i) Factories in which Sections 1, 2, 3, 4, and 6 enforced by Local Authority	7	-	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	16	-	-	-
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	-	-	-	-
Total	23	-	-	-

Cases in which defects were found	...	...	...	...	...	Nil
Cases in which defects found were remedied	Nil

Outworkers

No. of outworkers in August List required by Section 110	12
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APPENDIX D - TABLE 3

HOUSING

Action taken during year

1.	No. of houses included in Clearance Areas for which Orders are still to be made	Nil
2.	No. of Houses in Clearance Areas which have been patched for temporary accommodation under Section 48 of the Housing Act, 1957	Nil
3.	No. of Houses closed or demolished under Section 42 of the Housing Act, 1957 (Clearance Areas) ..	Nil
4.	No. of Houses demolished or closed (a) under Section 17 of the Housing Act, 1957 (individual unfits).....	50
5.	No. of temporary dwellings (huts etc,) demolished	Nil
6.	No. of Houses declared unfit under Section 9 of the Housing Act, 1957 (capable of repair)	Nil
7.	No. of Houses made fit during year.....	Nil
8.	No. of unfit Houses occupied under Licence	Nil
9.	Houses in multiple occupation (Housing Act, 1961) Action taken	Nil
10.	Reconditioning of Condemned Houses - Exclusion from Clearance/Demolition Orders (Housing Act, 1961) Action taken	Nil
11.	Substitution of Closing Order for Demolition Order (Housing Act, 1961) Action taken	Nil
12.	<u>Rent Act, 1957 (1st Schedule)</u> - Certificates of Disrepair	
	(a) No. of applications received	Nil
	(b) No. of Certificates issued	Nil

	Houses erected during year		Houses in course of erection		Gained from conversion of large houses or buildings into flats or dwellings	Lost from conversion of two or more houses to one
	For Slum Clearance	For other purposes	For Slum Clearance	For other purposes		
Local Authority	-	4	-	-	-	-
Private Enterprise	-	7	-	3	1	-

<u>No. of Post-War houses erected from 1st April, 1945 to 31st Dec., 1962</u>				Housing Programme 1963
By Local Authority		By Private Enterprise		
232		71		

No. of temporary housing units occupied	(i) Prefabs	50
	(ii) Huts, etc.	Nil
No. of houses found overcrowded		Nil

Houses required

(i)	To replace houses scheduled for demolition	) For all purposes ...	110
(ii)	To abate overcrowding		
(iii)	For other purposes		
(iv)	Application for Council houses at the end of the year		
	(a) Urgent bona fide cases		67
	(b) Application for Old Peoples' Dwellings		51
	(c) Others		-
	Total Applications	... ..	118
(v)	Total number of Council Houses sold during the year		2

	No. of permanent dwellings in District as at 31.12.61 (a)	Gained from conversions and erected during 1962 (b)	Total (a) + (b)	Less Houses demolished, closed, etc. during year	No. of permanent dwellings in District as at 31.12.62.
L.A.	272	4	276	2	274
P.E.	778	10	788	-	788
Totals:	1050	14	1064	2	1062

OLD PEOPLES' DWELLINGS

No. erected to 31.12.62		No. in course of erection	
With County Council Aid.	Without County Council Aid	With County Council Aid	Without County Council Aid
23	4	-	-

IMPROVEMENT GRANTS

A. Discretionary

No. of applications and houses dealt with by the Local Authority during year

(1)	(2)
Received 3	Approved 3
Applications - No. of Dwellings 3	Applications - No. of Dwellings 3

<u>Note:</u>	No. of applications approved in respect of owner/occupiers during the year	2
	Average cost per dwelling approved during year	£380
	Amount of grant payable by Local Authority	£190

B. Standard:

No. of applications	(a) Received	...	...	...	4
	(b) Approved	...	...	...	4
No. of Houses where Standard Amenities have been provided					26

<u>Note:</u>	No. of applications approved in respect of owner/occupiers during the year	4
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APPENDIX D - TABLE 4

Slaughterhouses

Carcases and offal inspected and condemned in whole or in part

	<u>Cattle excluding Cows</u>	<u>Cows</u>	<u>Calves</u>	<u>Sheep and Lambs</u>	<u>Pigs</u>	<u>Horses</u>
No. killed (if known)	685	2740	3504	5089	678	-
No. inspected	502	218	6	946	314	-
<u>All diseases except tuberculosis and Cysticerci</u>						
Whole carcasses condemned	1	2	-	1	-	-
Carcases of which some part or organ was condemned	20	45	-	2	22	-
Percentage of the number inspected affected with disease other than tuberculosis & cysticerci	4.18	21.06	-	0.32	7.01	-
<u>Tuberculosis only</u>						
Whole carcasses condemned	-	-	-	-	-	-
Carcases of which some part or organ was condemned	-	-	-	-	6	-
Percentage of the number inspected affected with tuberculosis	-	-	-	-	1.91	-
<u>Cysticercosis</u>						
Carcases of which some part or organ was condemned	6	4	-	-	-	-
Carcases submitted to treatment by refrigeration	-	-	-	-	-	-
Generalised and totally condemned	-	-	-	-	-	-
<u>Weight of meat condemned (in lbs.) for:-</u>						
(a) Tuberculosis	-	14	-	-	64	-
(b) Cysticercosis	20	40	-	-	-	-
(c) Other	274	747	-	12	382	-
Total (in lbs.) condemned	294	801	-	12	446	-

